## MEDICAID MEMBERS

 and TOBACCO'S BURDEN IN COLORADO

Tobacco use is the leading preventable cause of death.

FACT: Low socioeconomic status** is the greatest single predictor of cigarette use.

## IN COLORADO

Adult Medicaid members smoke at nearly 3X THE RATE of adults with other health insurance.*

## FXPANDFD BFNFFITS

As a result of the Affordable Care Act, comprehensive tobacco cessation coverage including counseling, medication, and QuitLine services are available to all Medicaid members in Colorado.


## FORTUNATELY:

Comprehensive cessation treatment for Medicaid members results in \$2.12 return on investment for every $\$ 1.00$ spent. ${ }^{* * *}$

## INCREASE ACCESS TO TOBACCO CESSATION TREATMENT

## HEALTHCARE DECISIONMAKERS

- Implement systems that institutionalize tobacco use screening and intervention, including promoting referrals to the Colorado QuitLine.
- Integrate tobacco dependence treatment into electronic health records and workflows.


## SOCIAL AND MEDICAL SERVICE PROVIDERS

- Implement Clinical Practice Guidelines with every member including 5As.
- Talk with Medicaid members about tobacco cessation benefits.
- Seek reimbursement for Medicaid covered services.
- Arrange follow-up visits and monitor for relapse.


## MEDICAID MEMBERS

- Talk to your doctor about quitting tobacco.
- Call the Colorado QuitLine 1-800-QUIT-NOW for help to quit.
- Create smoke-free rules in your home and car.
- Ask your employer and landlord for smokefree policies where you live and work.

[^0]
[^0]:    *Adult Tobacco and Attitudes Behavioral Survey (TABS) 2012
    ** Low SES: no high school diploma (may have GED), no health insurance, $<200 \%$ of federal poverty level, or with a disability.
    *** Richard, P., West, K., \& Ku, L. (2012). The return on investment of a Medicaid tobacco cessation program in Massachusetts. PloS one, 7(1), e29665. DOI: 10.1371/ journal.pone. 0029665

